

1.) CORPORATION NAME:

Unitrin Safeguard Insurance Company

DUE DATE: **1/31/2012**

SCC ID NO: **F1693292**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

CT CORPORATION SYSTEM

4701 COX RD STE 301

GLEN ALLEN, VA 23060

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	3,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

WI

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 400 SOUTH EXECUTIVE DRIVE

CITY/ST/ZIP: BROOKEFIELD, WI 53005-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: RICHARD ROESKE
TITLE: DIRECTOR
ADDRESS: 1 E WACKER DRIVE
CITY/ST/ZIP/CO: CHICAGO, IL 60601-

OFFICER DIRECTOR

NAME: FRANCIS J SODARO
TITLE: DIRECTOR
ADDRESS: 1 E WACKER DRIVE
CITY/ST/ZIP/CO: CHICAGO, IL 60601-

OFFICER DIRECTOR

NAME: CLARK H ROBERTS
TITLE: ASST VP & Treas
ADDRESS: 12926 GRAN BAY PARKWAY WEST
CITY/ST/ZIP/CO: JACKSONVILLE, FL 32258-

OFFICER DIRECTOR

NAME: DENISE I LYNCH
TITLE: PRESIDENT
ADDRESS: 12926 GRAN BAY PARKWAY WEST
CITY/ST/ZIP/CO: JACKSONVILLE, FL 32258-

OFFICER DIRECTOR

NAME: JAMES A SCHULTE
TITLE: PRESIDENT
ADDRESS: 12926 GRAN BAY PKWY W
CITY/ST/ZIP/CO: JACKSONVILLE, FL 32258-

OFFICER DIRECTOR

OFFICER DIRECTOR

NAME: JAMES W HENDRY
TITLE: VICE PRESIDENT
ADDRESS: 12926 GRAN BAY PKWY WEST
CITY/ST/ZIP/CO: JACKSONVILLE, FL 32258-

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

<u>/s/ CLARK H ROBERTS</u>	<u>CLARK H ROBERTS, ASST VP &</u>	<u>1/17/2012</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>Treas</u> PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.